STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

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MAY 2 4 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

(RSA Chapter 15) PLEASE PRINT

I. Name of Lobbyist(s) C. Olivia 710/	NEW HAMPSHIRE DEPARTMENT OF ST
П. Name of lobbyist's partnership, firm or corporation, if any:	
Open Democrary Action Open Democrary Action	incy_
Business Address: (Street) (Town/City) (State)	(Zip Code)
$(603 - 715 - 8197) \qquad (Fax) \qquad e-mail 0111100$	opendemocrac
III. This statement covers: (Choose one – file separate reports for each client, OR you may reportable expense transactions which are not attributable to any one client).	file a separate report for
☐ All reportable transactions occurring in the months prior to the reporting date relative to the fo	ollowing client:
(Full Name of Client as it appears on the Lobbyist Registration Form) OR	Action
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying fit unrelated to any particular client.	rm listed below which are
IV. Date of Report April 25, 2018 Reports cover: activity from date of registration to 3/31/18 October 31, 2018 July 25, 2018 □ activity from 4/1/18 to 6/30/18 January 30, 2019 □ activity from 7/1/18 to 9/30/18 activity from 10/1/18 to 12/31/18	
V. There have been no fees received and no reportable transactions made since the If this box is checked, complete just this form and submit it to the Secretary of State's Office, State Concord, NH 03301.	last report. □ e House, Room 204,
VI. Check if additional reports are attached:	
☐ If you have received fees or made expenditures, you must file Addendum A- Fees and Expe	
☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B— Repor Expense Reimbursement	t of Honorariums or
☐ If you, your firm, or your family has made political contributions, you must file Addendum	C- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the fore and complete to the best of my knowledge and belief.	egoing information is true
(Signature of lobbyist) (Signature of lobbyist) (Date)	<u> 20</u> 15
(Print Name of lobbyist)	

PLEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) C. OIVIQ ZINK	
II. Name of lobbyist's partnership, firm or corporation, if any: (Name of partnership, firm or corporation) (Name of partnership, firm or corporation)	eracy Action
III. Name of Client Open Democracy Open Democra	ayatohon 31-Marc
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a)\$_465,-
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 465— ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>465.</u> —
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to rep fees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office eximidividual expenses where the expenditure was of \$25.00 or less (for exampl lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	elient and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid epenses; (b) the aggregate total of all e: meals purchased during a business is than \$10 that is given to the person d with a value of \$25.00 or less); and rting period of greater than \$25.00 for he of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$465
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d)s 465.			
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$			
f) Total of all expenses year to date	ns 465.			
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting			
Paid to:	Amount:			
Salary and Benibits	s465			
	\$			
	\$			
	\$			
	\$			
	\$			
•••••••••••••••••••••••••••••••••••••••				
Sworn Statement/Affirmation by Lobbyist				
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information			
(Signature of lobbyist)	3)-March-2018 (Date)			
(Print Name of lobbyist)				

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobi	ying partne	rship, firm, or corpo	ration: Open D	emocraci,
Name of Clies	nit (leave bla	nk if Statement is fo	r the partnership, firm	, or corporation and not related to any
particular clie	nt):			
Date of Repor	rt (check on	e):		
April 25, 201	8 🕱	July 25, 2018 🛚	October 31, 2018	January 30, 2019 □
I have read R the following sübmitted):	SA 15, RSA Addendum	A 15-B, RSA 664, the submitted with the	ne Statement of Incom nt Statement (insert th	e and Expenses described above, and e number of Addendum forms being
Adde	ndum A(s).			
Adder	ndum B(s).			
Adde	ndum C(s).			
-		hat the foregoing in hat the foregoing in		ment and each Addendum is true and
(Signature of	lobby(st)			24-April-2018 (Date)
(Print Name o	1 Zun	<u>K</u>		